

REMARKS/ARGUMENTS

In response to the Office Action dated April 16, 2007, claims 15-20, 22 and 23 have been canceled without prejudice or disclaimer, and claims 1, 11 and 14 have been amended. No new matter has been added. Reexamination and reconsideration of the claims as requested is respectfully requested.

Claim 1 is amended only to clarify the claim language; this amendment does not raise any new issues and does not require a further search. Claims 11 and 14 are amended to maintain proper antecedent basis. None of amended claims 1, 11 and 14 are changed in scope by these amendments.

Claims 15-20, 22 and 23 are cancelled because they are identical in scope to claims 3-11, respectively.

Claim Rejections – 35 U.S.C. §103

On page 3 of the Office Action, claims 1-7, 11, 14, 16-19 and 23 are rejected under 35 U.S.C. § 103(a) as being unpatentable over Anderson, et al. in combination with Chernoff, Sator, et al. and Neigut (US5,378,461); on page 4 of the Office Action, claims 8, 10, 20 and 22 are rejected as being unpatentable over Anderson, et al. in combination with Chernoff, Sator, et al. and Neigut as applied to claims 1-7, 11, 14, 16-19 and 23 and further in combination with Mueller, et al.; and on page 4 of the Office Action, claim 15 is rejected as being unpatentable over Anderson, et al. in combination with Chernoff, Sator, et al. and Neigut as applied to claims 1-7, 11, 14, 16-19 and 23 and further in combination with Bonis, et al. The Applicant respectfully traverses this rejection, but has amended the application to overcome the objections.

Three criteria must be met to establish a *prima facie* case of obviousness. First, there must be some suggestion or motivation, either in the references themselves or in the knowledge generally available to one of ordinary skill in the art, to modify the reference. Second, there must be a reasonable expectation of success. Finally, the

prior art reference, or combination of references, must teach or suggest all the claim limitations. MPEP § 2142. Applicant respectfully traverses the rejection since the prior art fails to disclose all the claim limitations and there would be no motivation to combine the references as proposed by the Examiner. Applicant believes current claim 1 is in condition for allowance. Reconsideration, allowance, and notice to that effect are respectfully requested.

Amended claim 1 recites a method for treating first and second skin areas affected by psoriasis, which includes “determining a first and a second laser radiation dose that causes a visible redness without blister formation to occur in the first and second skin areas, respectively,” and “gradually varying a UV radiation dose per treatment from the first skin area to the second skin area depending on the first and second epidermis thicknesses and the first and second radiation doses.” In particular, Applicant wishes to call attention to the above determining step, and that the UV radiation dose is gradually varied from area to area; Applicant asserts that neither this determining step nor the gradual variation is taught or suggested by any combination of the cited references.

It is the impression of Applicant that the Examiner misunderstands Anderson, et al. As pointed out in a previous Office Action, there is no variation of the UV radiation dose in dependence on the epidermis thickness of skin areas affected by the skin disease. Anderson, et al. only differentiate between affected areas and non-affected areas. Affected areas are treated with the full (therapeutic) radiation dose while no therapeutic dose at all is applied to those areas not involved by the skin disease. There is no gradual adjustment of the radiation dose for different epidermis thicknesses. According to Anderson, et al. the decision is only binary. The system decides between “yes, the therapeutic dose of radiation is applied to the scanned area” or “no, no therapeutic dose of radiation is applied to the scanned area”.

With respect to the argument of the Examiner that Anderson, et al. determine whether or not an additional treatment pulse should be directed to the plaque (column 15, lines 37-48) this paragraph explicitly says that the shutter remains completely open and

delivers phototherapeutic doses to subsequent areas until the diagnostic ratios indicate that the scanned area is not an affected area. Obviously the phototherapeutic doses are delivered to different areas. There is no determination for one special area whether to direct another treatment pulse to the plaque or not. Per treatment, all plaques will be provided with the same dose, independent of the thickness of the plaques.

This can also be seen from figure 3, step 116. The system determines whether both ratios are above their threshold values and in case delivers a therapeutic dose of radiation to the scanned area. Afterwards, the scanning mirror is advanced one step in order to determine the CCD reflectance ratio for the next area. The system does not determine whether an additional pulse should be applied to the skin area already treated by application of a therapeutic radiation dose. All skin areas affected by the skin disease will therefore be treated with the same dose of radiation without variation in dependence on the epidermis thickness.

The Neigut reference appears to be of marginal importance because it deals with compositions for topical treatment of skin damages. The only relevant part of this document (col. 13) hardly discloses anything more than that psoriasis plaques can be treated by UVB radiation.

The remaining documents also fail to disclose a variation of the UV radiation dose from one affected skin area to another affected skin area in dependence on the epidermis thickness. Chernoff does not deal with the treatment of psoriasis. Sator, et al. only report that results of PUVA treatment not about methods of carrying out the treatment itself. Müller, et al. discloses a combined device for invasive and endoscopic work comprising an ultrasound source and a laser. However, the instrument is used for a totally different purpose, especially not for the treatment of skin diseases let alone the treatment of psoriasis.

As a result, none of the cited references, taken alone or in combination, teach or suggest a method for treating first and second skin areas affected by psoriasis which includes “determining a first and a second laser radiation dose that causes a visible redness without blister formation to occur in the first and second skin areas, respectively,” and “gradually varying a UV radiation dose per treatment from the first skin area to the second skin area depending on the first and second epidermis thicknesses and the first and second radiation doses,” as recited by amended claim 1. Applicant asserts that amended claim 1 is therefore allowable. Reconsideration, allowance, and notice to that effect are respectfully requested.

Dependent claims 2-8, 10, 11 and 14, which are dependent from independent claim 1, were also rejected under 35 U.S.C. §103(a) as being unpatentable over the cited references. While Applicant does not agree with the particular rejections to these dependent claims, it is believed that these rejections are moot in view of the remarks made in connection with independent claim 1. These dependent claims include all of the limitations of the base claim and any intervening claims, and recite additional features which further distinguish these claims from the cited references. Therefore, dependent claims 2-8, 10, 11 and 14 are also in condition for allowance. Reconsideration, allowance, and notice to that effect are respectfully requested.

CONCLUSIONS

In view of the amendments and reasons provided above, it is believed that all pending claims are in condition for allowance. Applicant respectfully requests favorable reconsideration and early allowance of all pending claims.

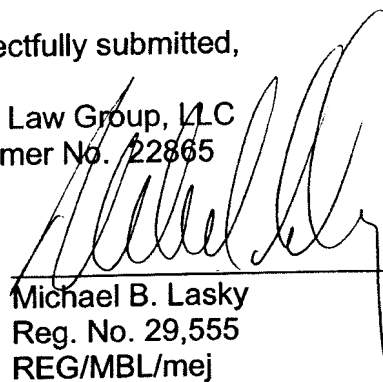
If a telephone conference would be helpful in resolving any issues concerning this communication, please contact Applicant's attorney of record, Michael B. Lasky at (952) 253-4106.

Respectfully submitted,

Altera Law Group, LLC
Customer No. 22865

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By:


Michael B. Lasky
Reg. No. 29,555
REG/MBL/mej